DRAFT ADEM Notification for Aboveground Storage Tanks Phone # (334) 270-5655 Alabama Dept. of Environmental Management STATE USE ONLY Groundwater Branch/Land Division Fax # (334) 270-5631 P. O. Box 301463 E-mail: ustcompliance@adem.alabama.gov Montgomery, AL 36130-1463 Web Site: adem.alabama.gov **INSTRUCTIONS** Please type or print all items except "signature" in Section XII. This form must be completed for each location containing aboveground Indicate number of storage tanks. If more than 5 tanks are owned at this location, photocopy, and staple continuation sheets to this form. continuation sheets attached. I. OWNERSHIP OF TANK(S) II. LOCATION OF TANK(S) Mailing Address_____ Facility Name _____State_____Zip____ Address State Zip (Nearest) E-mail Facility Phone # III. OPERATOR OF TANKS IV. FUEL DELIVERY COMPANY Operator means any person in control of, or having responsibility for, the daily operation of the UST system. Operator Name____ Company Name_____ (If same as section I, mark box here Mailing Address_____ City_____State____Zip____ _____State_____Zip___ Phone # Fax # Phone #_ E-mail V. TYPE OF NOTIFICATION If this is a new notification for this location, mark box here: If this is an amended or subsequent notification for this location, mark box here: Mark box here if tank(s) are located on land within an Indian reservation or on other Indian trust lands: Indicate number off aboveground storage tanks at this location: Indicate number of **underground** storage tanks at this location: VII. DESCRIPTION OF ABOVEGROUND STORAGE TANKS (Complete for each tank at this location) Tank Identification # Tank # Tank # Tank # Tank # Tank # Arbitrarily Assigned Sequential Number (e.g. 1a, 2a, 3a) а A. Tank Status (Mark all that apply) 1. Currently in use 2. Temporarily closed a. Estimated date last used (month/year) B. Tank Location (Mark all that apply)

Arbitrarily Assigned Sequential Number (e.g. 1a, 2a, 3a)

A. Tank Status (Mark all that apply)

1. Currently in use
2. Temporarily closed

a. Estimated date last used (month/year)

1. Located above ground

a. Within 300 feet of a private well

b. Within 1000 feet of a public water supply well

c. Within a well head protection area

2. Located in an underground area such as basement, cellar, mineworking, drift shaft, or tunnel, and is situated upon or above the floor surface.

(Notification Not Required)

C. Tank History

1. Date installed (month/day/year)

2. Date brought into operation by this owner (month/day/year)

D. Tank Estimated Total Capacity (gallons)

Owner Name Location (from Section I) (from Section II)

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VII. DESCRIPTION OF ABOVEGROUND STORAG	GE TANKS (Comp	lete for each tank	k at this	locatio	n)		
Tank Identification #	Tank#	Tank#	Tanl	(#	Tank#	Tank#	
Arbitrarily Assigned Sequential Number (e.g. 1a, 2a, 3a)	a	a		а	a	a	
E. Substance Currently Stored (Mark all that apply)							
1. Petroleum							
a. Unleaded gasoline							
b. Mid-grade gasoline							
c. Premium gasoline							
d. Ethanol free gasoline							
e. Gasoline containing greater than 10% ethanol (please specify)							
f. 100% ethanol (Notification Not Required)							
g. Ultra low sulfur gasoline							
h. On road diesel							
i. Off road diesel							
j. Diesel containing less than or equal to 20% biodiesel							
k. Diesel containing greater than 20% biodiesel (please specify)							
I. 100% biodiesel (Notification Not Required)							
m. Kerosene							
n. Aviation fuel (JP-4, etc.)							
o. Used oil							
p. Virgin oil							
g. E-85				-			
r. B-20 biodiesel				-			
s. Other (please specify)							
F. Tank Usage (Mark all that apply)							
1. Emergency power generator							
2. Retail							
3. Bulk facility							
4. Industrial							
5. Local government				-			
6. State/federal government				-			
7. Farm/residential tank less than 1,100 gal (Notification Not Required)				-			
8. Pipeline terminal tank, refinery terminal tank, rail and barge terminal tank,				-			
heating oil (Notification Not Required)							
VIII. CERTIFICATION (Read and sign a	after completing S	Sections I. Through	ah VII.		-		
I certify under penalty of law that I have personally examined and am familiar with the informa individuals responsible for obtaining the information, I believe that the submitted information is	tion submitted in this	and all attached doc		and that h	based on my inquiry	y of those	
Name & official title of tank operator or authorized representative					Date Signed		
Marile & official title of tank operator of authorized representative				Date Sig	Jileu		
Signature							
Name & official title of tank <u>owner</u> or authorized representative				Date Signed			
Signature							

Requirements for Trust Fund Eligibility

The tank must be registered with the underground storage tank section of ADEM.

A copy of a registration certificate is proof of registration.

The tank must contain a motor fuel, and not be excluded by the trust fund regulations.

For information regarding trust fund eligibility, call ADEM at 224-270-5655

The tank must be in substantial compliance with the applicable requirements below at the time of the discovery of the release with the following (For information call ADEM at (334) 274-4203).

Spill Prevention Control & Countermeasure (SPCC) plan prepared by a registered professional engineer. NPDES or SID stormwater permit.

The release must have occurred after August 1, 1993.

The tank cannot be owned by the state or federal government.